



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

ICHIRO MATSUYAMA

Appln. No.: 10/618,666

Filed: July 15, 2003

For: PRINTING APPARATUS AND  
METHOD

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Examiner: W. H. Hamdan  
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Group Art Unit: 2854  
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April 29, 2004

Mail Stop Amendment  
Commissioner of Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of January 29, 2004, please amend the above-identified application as follows. Amendments to the specification are reflected on page 2, amendments to the claims are reflected in the listing beginning on page 3, comments regarding amendments to the figures begin on page 9, and the Remarks begin on page 10. An Appendix including both drawing replacement sheets and annotated drawing sheet showing the changes to the figures is attached following page 13.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

April 29, 2004  
(Date of Deposit)

Leonard P. Diana (Reg. No. 29,296)  
(Name of Attorney for Applicant)

  
Signature

April 29, 2004  
Date of Signature



In re Application of:

ICHIRO MATSUYAMA

Application No.: 10/618,666

Filed: July 15, 2003

For: PRINTING APPARATUS AND METHOD  
FOR NON-MARGIN PRINTING (As Amended)

Docket No. 01272.020599

Examiner: W. H. Hamdan

Group Art Unit: 2854

Date: April 29, 2004

Mail Stop Amendment  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 24	MINUS	** 24	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						previously paid
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$ \_\_\_\_\_ is enclosed.
- Charge \$ \_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- A check in the amount of \$ \_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- A check in the amount of \$ \_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant

Registration No. 29296

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10112-3800  
Facsimile: (212) 218-2200